

Margaret Clayton

Town

County

MARYLAND

Died at

Crown

Tabor

Month Day

Y. M. D.

Native of

Occupation

Date 189 8

July 1

Age 41 1/2

M

H

~~Male~~~~White~~

Married

~~Widow~~~~Divorced~~

Female

Colored

Single

Widower

Number of children living 1

Husband

of

Eunice Clayton

Wife

Father's

Name

Carr Hardy

Mother's

Name

Rosie Herbert

Cause of

Primary

Concussion

How long sick

5 yrs

Death

Immediate

General Debility

Accident, Suicide, Homicide

Reported by

J. B. Harris

Address

Crown

M

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

P.C.I. 4

Name in Full

Certificate of Death

Mary Ann Callison

Town

County

MARYLAND

Died at

Easton

Talbot

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

July 4

Age

24.3.20

Md

Wife

White

Married

Widow

~~Married~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

2

~~Husband~~ of

Charles E Callison

Wife

Father's

Name

Wm J. Hargerson

Mother's

Name

Elenora Harrison

Cause of

Primary

Pulmonary Phthisis - six months

How long sick

Death

Immediate

Asthma

Accident, Suicide, Homicide

Reported by

E. R. Dupper

Address

Easton

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Robert Kane Collison

Town

County

MARYLAND

Died at

Oxford

Talbot

Month

Day

Y

M.

D.

Native of

Occupation

Date 189

July 27

Age

76-7-28

Maryland Farmer

Male

White

Married

~~Widow~~~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

8

Husband

of Mary F. Davis

Wife

Father's

Name

Andrew Collison

Mother's

Name

Eleanor Subbs

4

Cause of

Primary

Chronic Bulbar Paralysis

How long sick

Three years

Death

Immediate

Paralysis Extension 44

~~Accident, Suicide, Homicide~~

Reported by

J. A. Stevens M.D.

Address

Oxford Md



Name in Full

Certificate of Death

Name in Full *Mrs Susan Dodd*  
 Died at *Wye Mills* Town *Garret* County *MARYLAND*  
 Date 189*8* Month *7* Day *7* Age *42-1-14* Y. M. D. Native of *MD* Occupation *Teacher*  
~~Male~~ White ~~Married~~ Widow ~~Divorced~~  
 Female ~~Colored~~ Single ~~Widower~~ Number of children living *three*  
 Husband of *Late Henry Dodd*  
 Wife *Phillips* Mother's Name  
 Cause of Death { Primary *Leucemia of liver, from metastasis* How long sick  
 Immediate *Heart failure 90* Accident, Suicide, Homicide  
 Reported by *Harold B. Hopkins, M.D.*  
 Address *Wye Mills, MD.*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068



Name in Full

Certificate of Death

*George Thomas Henderson*

Died at *Easton Md* *Talbot.* *MARYLAND*

Date 189 *8* Month *7* Day *13* Age *68* Y. M. D. *---* Native of *Md* Occupation *Retired*

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single Widower Number of children living *4*

Husband of

~~Wife~~ *Henderson*

Father's Name *E. B. Jordan* Mother's Name *Mrs. Jordan*

Cause of Death { Primary *Diarrhea* *83* How long sick *1 year*

Death { Immediate *Heart Failure* ~~Accident, Suicide, Homicide~~

Reported by *R. E. M. Henderson*

Address *Easton Md.*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70706



Cecile Harris

Town

County

Died at

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

8

7. 11.

Age

about 40

Coulter Co

Laborer

~~Male~~~~White~~

Married

~~Widow~~~~Divorced~~

Female

Colored

~~Single~~~~Widower~~

Number of children living about 7 or 8

Wife

of

Chas. Harris

Father's

Name

Dmt known

Mother's

Name

Dmt known

Cause of

Primary

Chronic Brights

How long sick

about 6 mos

Death

Immediate

acute B. Suppurating causing uraemia

Accident, Suicide, Homicide

Reported by

Dr. Hackett

Address

Queen Anne Is.

97



At name *Harrison*  
 Died at *Tipton* Town *Jalbot* County MARYLAND

Date 189*8* Month *July* Day *27* Age *1.89* Y. *8* M. *9* D. *Tipton* Native of *Bake* Occupation  
~~Male~~ *White* ~~Married~~ *Widow* ~~Divorced~~  
 Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living

Husband  
 of  
 Wife

Father's Name *Edward P. Harrison* Mother's Name

Cause of Death { Primary *Marasmus* How long sick *One month*  
 Immediate *Cholera Infantum* ~~Accident, Suicide, Homicide~~

Reported by *Dr. S. K. Wilson* IV

Address *Tipton* *Ind*



William  
TownHelsby  
County

Died at Oxford

Tolbot-

MARYLAND

Date 1898 July 22 Age 19 - 3 - 3<sup>1</sup> Native of Md. Occupation Laborer

Male White Married Widower Divorced

Female Color Single Widower Number of children living

Husband of \_\_\_\_\_

Wife

Father's Name Millsby Helsby Mother's Name Mina Robinson

Cause of Death { Primary Typhoid Fever How long sick 10 days

Death { Immediate " " Accident, Suicide, Homicide

Reported by J. A. Stevens M. D.

Address Oxford Md.



Name in Full

Certificate of Death

*Wm Henry Jackson*  
 Town *Lilghman* County *Talbot*

Died at *Lilghman* *Talbot* MARYLAND

Date 1898 *July 1* Month *July* Day *1* Y. *73* M. *8* D. *25* Native of *Lilghman* Occupation *Oysterman*  
 Male *White* Married *Widow* Divorced *Female* *Colored* Single *Widower* Number of children living *4*

Husband of *Francis Louisa Jackson*

Father's Name *Francis Louisa Jackson* Mother's Name *Nancy Jackson*

Cause of Death { Primary *Hemiplegia* Immediate *Asphyxia* 45 How long sick *2 days* Accident, Suicide, Homicide

Reported by *Dr. S. Kennedy Wilson*

Address *Lilghman Talbot Co, Md*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Ernie Carver Randon

Town

County

MARYLAND

Died at

Oxford

Talbot

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

July

17

Age

1-7-18

Maryland

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~

Number of children living

Husband

of

Wife

Father's

Name

Charles W. Randon

Mother's

Name

Maggie Carver

Cause of

Primary

Cholera Infantum

How long sick

12 hours

Death

Immediate

Cholera - Exultum

Accident, Suicide, Homicide

Reported by

J. A. Stevens M.D.

Address

Oxford Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Perry Lloyd  
 Town Easton County Talbot

MARYLAND

Died at

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

7

14

Age

45.0.0

Md Laborer

Male

Married

Single

Female

Colored

Single

Widow

Number of children living

None

Husband

of

Annin Lloyd

Father's

Name

Thos. Lloyd

Mother's

Name

Sizzie Lloyd

Cause of

Primary

Pulmonary Tuberculosis

How long sick

3 years

Death

Immediate

Asphyxia

Accident, Suicide, Homicide

Reported by

Aaron Lucas

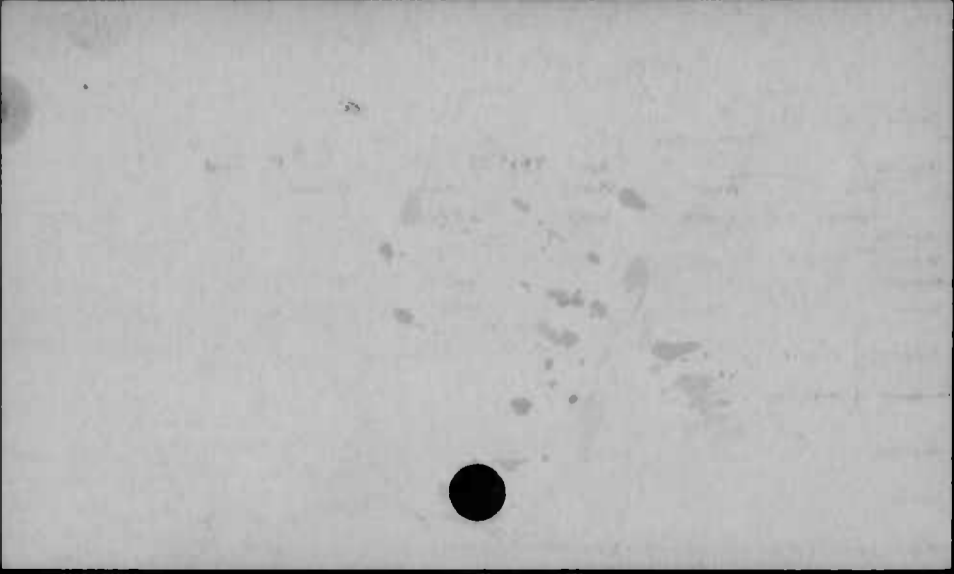
Address

Easton Md.

Undertaker

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068



Eliza Purnell.

Died at

Trappe.

Town

County

Talbot

MARYLAND

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

8

July

13

Age

80-85

Ind.

Servant.

~~Male~~~~White~~

Married

Widow

~~Divorced~~

Female

Colored

Single

Widower

Number of children living

3

Husband

of

Wife

Father's

Name

Louis Purnell  
not known

Mother's

Name

Mellie Smith

Cause of

Primary

Acute Rheumatism -

How long sick

4 months

Death

Immediate

Aerhenia

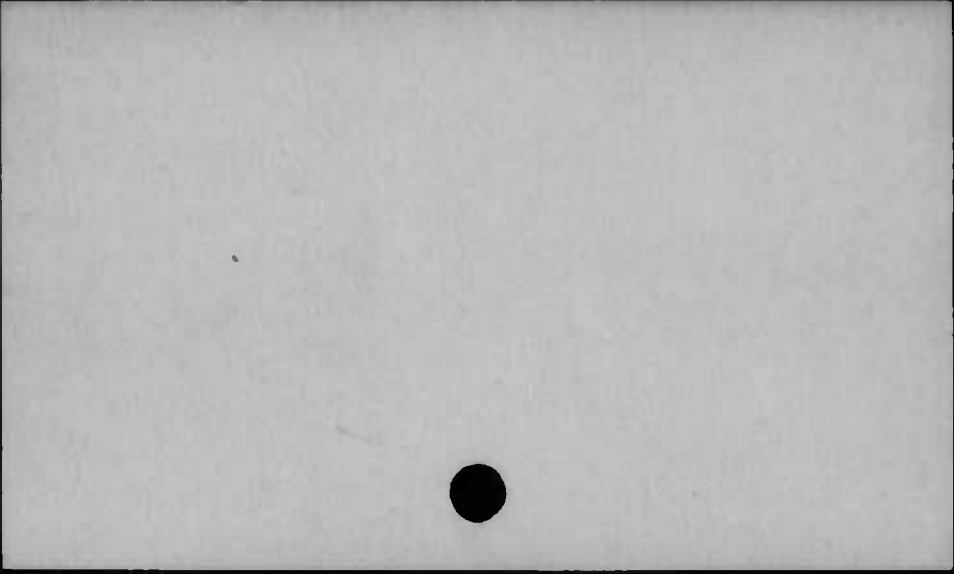
Accident, Suicide, Homicide

Reported by

Address

Joseph. A. Ross, Esq. of  
Trappe.

Talbot Co, Ind.



Name in Full

Certificate of Death

John Raymond Rhoads

Town

County

Died at

Near Way Mills

Talbot

MARYLAND

Date 189

8

Month

7

Day

14

Y.

7

M.

D.

Native of

Md

Occupation

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~~~Number of children living~~

Husband

Wife

Father's

Name

Samuel Rhoads

Mother's

Name

145

Rhoads

Cause of

Primary

Run over by a mule

How long sick

Death

Immediate

Internal Hemorrhage

Accident, Suicide, Homicide

Reported by

Howard B. Hopkins 112 40

Address

Way Mills Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 55089



Name in Full

Certificate of Death

Mamie Ricks

Died at

MARYLAND

Town

Easton

County

Tallbot Co.

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8

7 - 2

Age

0 - 2 - 15

Tallbot, Md

—

~~Male~~~~White~~~~Married~~~~Widow~~~~Divorced~~

Female

Colored

Single

~~Widow~~

Number of children living

~~Husband~~

of

~~Wife~~

Father's

Name

Phillip Ricks

Mother's

Name

Annie Ricks

Cause of

Primary

Inanition

How long sick

14<sup>0</sup>

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

Delia Ricks

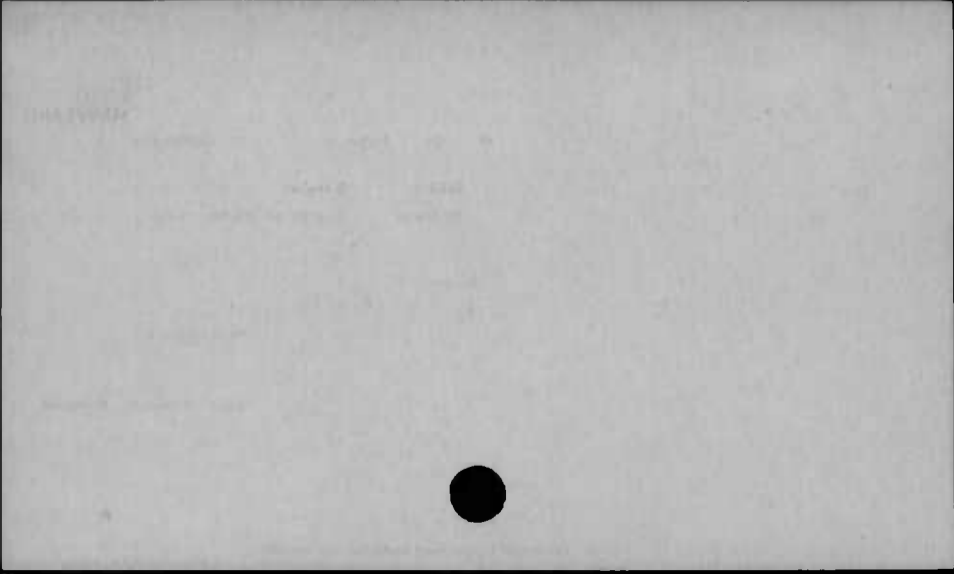
Undertaker

Address

Easton, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65958



Name in Full

Certificate of Death

Mrs. Lucy Ross

Town

County

Died at

Easton

Talbot

MARYLAND

Date 189

5

Month

Day

7-27

Age

Y.

M.

D.

Native of

Occupation

~~Male~~

White

Married

Widow

Divorced

Female

~~Colored~~

Single

Widower

Number of children living

Husband  
of  
Wife

Father's

Name

Mother's

Name

22a

Cause of

Primary

Tuberculosis

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

J. M. H. Baleman, M.D.,  
Easton, Md.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85968



Name in Full

Certificate of Death

August Smith  
 Died at Easton County Talbot MARYLAND

Date 1898 July 21 Month Day Y. M. D. Age 4- Native of Talbot Occupation Infant  
 Male ~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~  
 of  
~~Wife~~

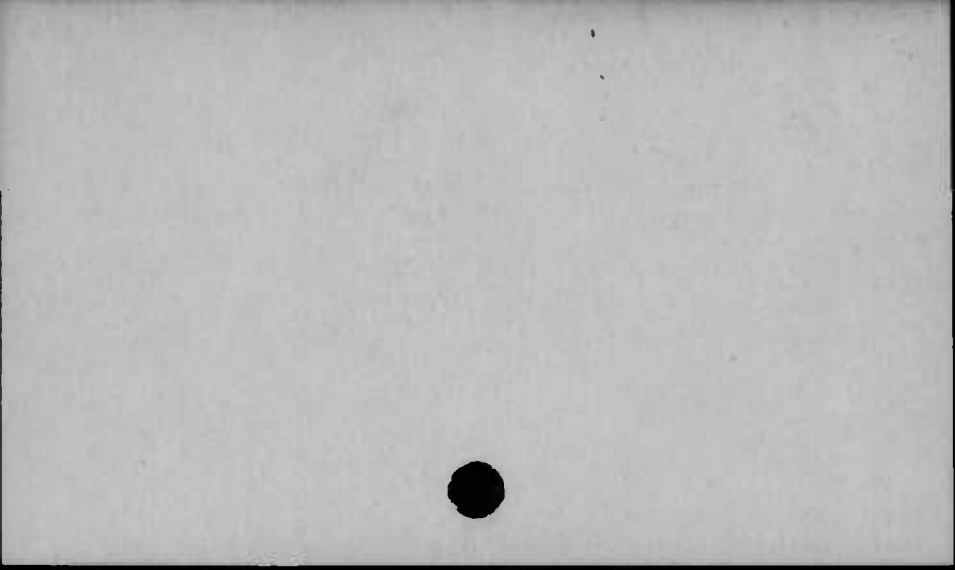
Father's Name Alfred Smith Mother's Name Lizzie Smith

Cause of Death { Primary Cholera Infantum How long sick Don't know  
 Immediate Exanthema 82 Accident, Suicide, Homicide

Reported by Joseph S. Garrison MD  
 Address Easton 210

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1898



Name in Full

Certificate of Death

*Pamela J. Spence*

Died at *Easton* Town *Salbot* County

MARYLAND

Date 189 *8* *July* *15* Month Day Y. M. D. Age *32. 4. 21* Native of *Maryland* Occupation *Housewife*  
~~Male~~ White Married ~~Widow~~ ~~Divorced~~  
 Female ~~Colored~~ ~~Single~~ ~~Widow~~ ~~Number of children living~~

~~Wife~~ of *James A. Spence*  
 Father's Name *John H. Thompson* Mother's Name *Henrietta Thompson*

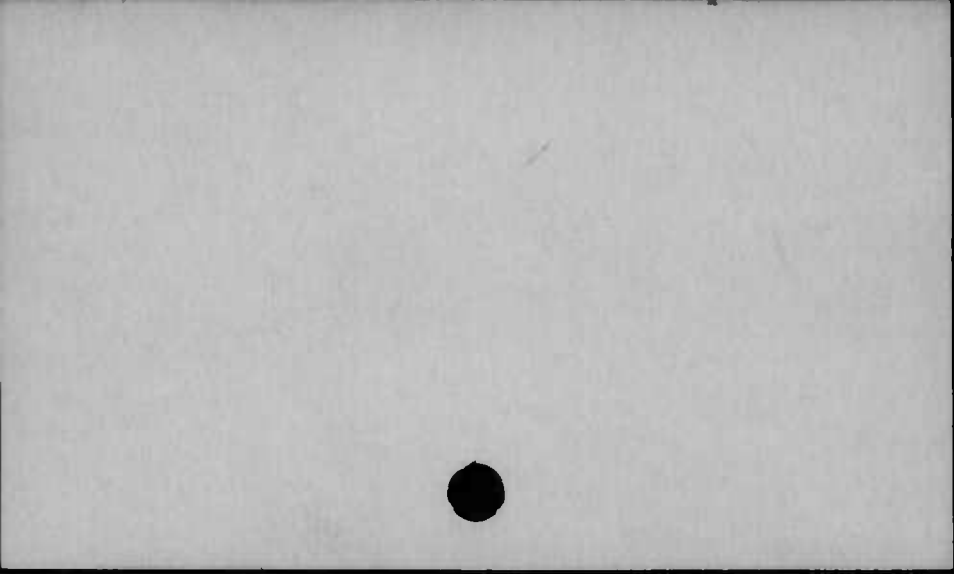
Cause of Death { Primary *Appendicitis* How long sick *5 days*  
 Immediate *Heart failure* ~~Accident, Suicide, Homicide~~

Reported by *Joseph S. Gannett, Jr.*

Address *95 East 7th*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 6508B



Name in Full

Certificate of Death

John Russell Staton

Town

County

Died at

Easton

Tackett

MARYLAND

Date 1898	Month July	Day 5	Age 1-6-2	Y. 1	M. 6	D. 2	Native of Ind	Occupation Infant
Male	White	Married	Widow	Divorced				
Female	Colored	Single	Widower	Number of children living				

Husband  
of  
Wife

Father's

Name

John S. Staton

Mother's

Name

Bessie C. Staton

Cause of

Primary

Cholera Infantum

How long sick

12 days

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

Joseph H. Garrison M.D.

Address

Easton

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068



Clinton Eugene Sullivan

Town

County

Died at

MARYLAND

Date 1898 July 24 Y. M. D. 10-24 Native of Md. Occupation —

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of \_\_\_\_\_

Wife

Father's Name Luke H. Sullivan Mother's Name Sarah E. Corkran

Cause of Death { Primary Whooping-cough How long sick 15 days

Death { Immediate Pneumonia-fatal } ~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by

Address

J. A. Stevens M.D.

Oxford Md.



Name in Full

Certificate of Death

Daisy Wilson

Died at

Trenton

County

Tahoe

MARYLAND

Date 189

8

Month

7

Day

6

Age

Y.

4

M.

2

D.

9

Native of

Md

Occupation

~~Male~~~~White~~~~Married~~~~Widow~~~~Divorced~~

Female

Colored

Single

~~Widower~~~~Number of children living~~

Husband

of

~~Wife~~

Father's

Name

Risto Wilson

Mother's

Name

Kate Jones.

Cause of

Primary

Dysentery

How long sick

3 wks.

Death

Immediate

Exhaustion

84

~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by

A. M. S. C. S.

M. J. S. C. S.

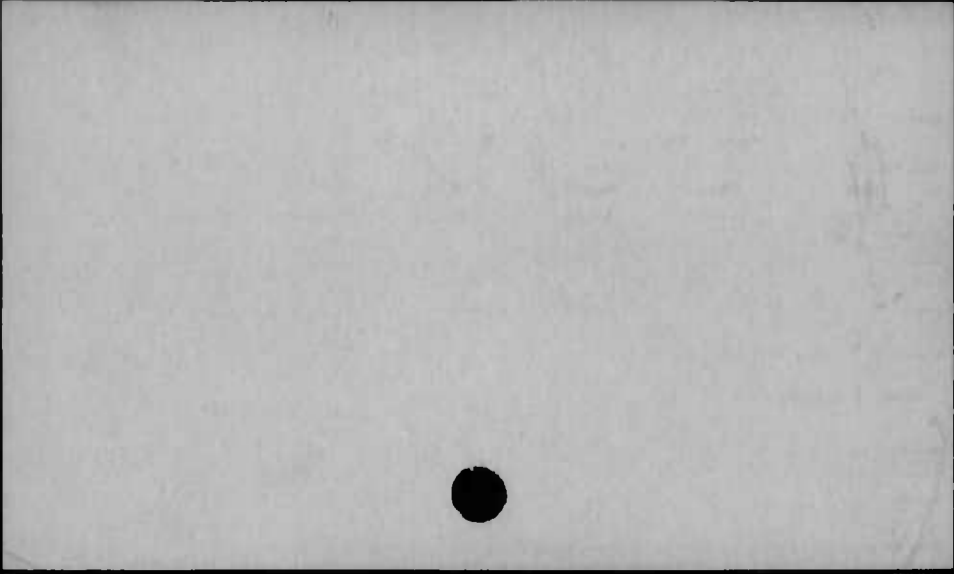
Address

Trenton

Md

Must be signed by ~~physician~~, if any in attendance, otherwise by ~~coroner~~, undertaker or minister.

LIBRARY BUREAU, 65968



Paul Henry Wilson

Town

County

MARYLAND

Died at Oxford

Talbot

Date 1897 July 5- Y. M. D. Native of Md Occupation

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of \_\_\_\_\_

Wife \_\_\_\_\_

Father's Name John H. Wilson

Mother's Name Emma V. Gosling

Cause of Primary Whooping Cough How long sick 15 days

Death Immediate Pneumonia/Exhaustion Accident, Suicide, Homicide

Reported by James A. Stevens Md.

Address Oxford Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

